

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			
		536	01/05/02
		1024	03-14-02

INDEX OF CLAIMS

+ = ✓
 (Through numeral)
 Restricted
 Allowed
 Canceled
 Rejected
 0
 A
 1
 N
 Non-elected
 Inference
 Applied
 Objected

Final
Original

Claim

Date

Final
Original

Claim

Date

Final
Original

Claim

Date

Final
Original

Claim

Date

Final
Original

Claim

Date

Final
Original

Claim

Date

If more than 150 claims or 10 actions
staple additional sheet re

(LEFT INSIDE)

01-25-02

779P(110)
3/15/02